

RECEIPT DATE: 05 / 15 / 01 SERIAL NUMBER: 09 / *8*56002 IA NUMBER: PCT/ FR99 / 02812 IA FILING DATE: 11 / 16 / 99 Υ FUCHS DELAY WAIVED (Y/N): FAMILY NAME: DEMAND RECEIVED (Y/N): Υ GIVEN NAME: PHILIPPE PRIORITY DATE: 11 / 16 / 98 PRIORITY CLAIMED (Y/N): Υ NO BASIC FEE (Y/N): US DESIGNATED ONLY (Y/N): N N ATTORNEY DOCKET NUMBER: 9320.12*8*US*WO* COUNTRY:

CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000 TELEPHONE 0000000000

FAX

NAME: JOHN J GRESENS

MERCHANT & GOULD

STREET: P 0 BOX 2903

CITY: MINNEAPOLIS

STATE/COUNTRY: MN ZIP: 554020903

EMAIL:

APPLICATION TITLES:

VIRTUAL SHOW AREA AT NOMINAL SCALE

TAB TO LAST POSITION, PUSH SEND